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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
Patent Examining Operations**

Applicant(s): Paul E. Young

Serial No: 10/561,372

Art Unit: Unassigned

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Examiner: Unassigned

TITLE: IDENTIFICATION OF THERAPEUTIC AGENTS USING GENETIC  
FINGERPRINTING

Docket No.: 689290-258

9 September 2009

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Transmittal**

Sir:

In support of the above-referenced patent application, Applicants submit the following:

1. Information Disclosure Statement (3 sheets);
2. Form 1449 (1 sheet); and
3. Postage paid, return receipt postcard.

No fees are believed due in filing this correspondence. The Commissioner is authorized to charge payment of any additional fees required under 37 CFR 1.17 associated with this communication or credit any overpayment to Deposit Account No. 03-0678.

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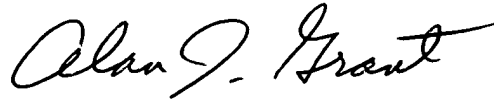
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Alan J. Grant      9/9/09  
Alan J. Grant, Esq.      Date

Respectfully submitted,



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